

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mm</i>		06-25-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	859	02-22-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1127	10/10/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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